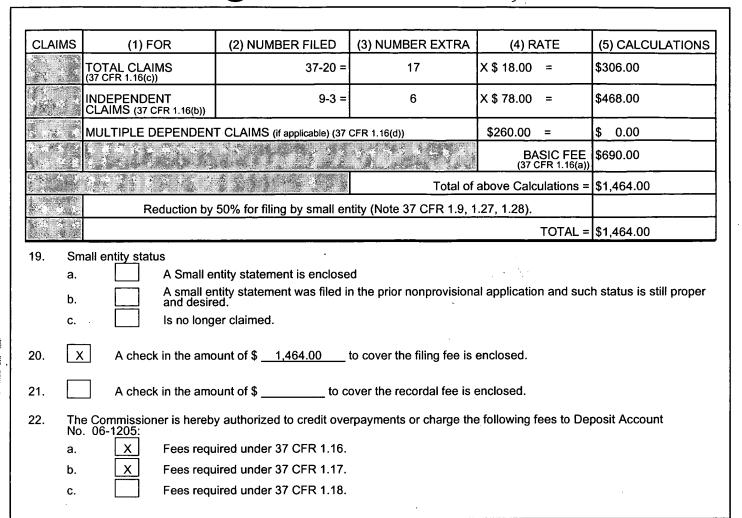
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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.	1272.C0397	⊃ [6]
First Name	d Inventor or Application Identifier	
KENICHI OHTA		je
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UpOnly for new nonprovisional applications under 37 CFR 1.53(b))			Express Mail	Label No.		,		
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				Assistant Commissioner for Patents Box Patent Application Washington, DC 20231				
l Fee Transn	nittal Form original, and a duplicate for i		6.					
2. X Specification	on <i>Total Pag</i>	es 61		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy				
3. X Drawing(s)	(35 USC 113) Total She	ets 20			•.	cal to computer copy)		
4. X Oath or Dec	claration Total Pag	es 2		c S	statement verifying	identity of above copies		
a. N	lewly executed (original or co	ру)		ACCOM	PANYING APPLIC	ATION PARTS		
	Inexecuted for information pu		8.		Papers (cover sheet			
c. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]			9.		(b) Statement is an assignee)	Power of Attorney		
i.	i. DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR				10. English Translation Document (if applicable),			
1.63(d)(2) and 1.33(b). Incorporation By Reference (useable if Box 4c is checked)			11.	Information Statement (Disclosure (IDS)/PTO-1449	Copies of IDS Citations		
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby				Preliminary	Amendment			
incorporated	incorporated by reference therein.			13. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
			14.	Small Entity Statement filed in prior application Statement(s) Status still proper and desired				
			15.	Certified Copy of Priority Document(s) (if foreign priority is claimed)				
·			16.	Other:				
								
17. If a CONTINUING ADDITION shock appropriate how and supply the requirity information.								
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Continuation Divisional Continuation-in-part (CIP) of prior application No/								
18. CORRESPONDENCE ADDRESS								
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below								
NAME								
	<u> </u>							
Address								
City		State			Zip Code			
Country		Telephone	-		Fax			



SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	Joseph W. Ragusa (38,586)		
SIGNATURE	Joseph W. Ragusa		
DATE	February 28, 2000		

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